

## PART B - FEE(STTRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDEN		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
	590 08/09/2004	(0.5)		paper have	s. Each additiona its own certificate	al paper, such as an assignm e of mailing or transmission.	ent or formal drawing, must	
MORGAN & FII 345 Park Avenue New York, NY 10	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.							
		S MOA n p to	<u>ā</u> /				(Depositor's name)	
		NOV	at S				(Signature)	
		MADEN	18.			(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/891,382	06/27/2001		Mikko Olkkonen			4208-4003	2602	
TITLE OF INVENTION: A	AD HOC NETWORK DISCO	OVERY MENU	11/09/2004 NNGUYEN2 00000030 09891382					
				ŧ	81 FC:9581		9.00 OP 1321.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$0		\$1330	11/09/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS		]		
TRAN, THIEN D		2665		370-465000		•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			-		ent front page, li	1 1/020-04	n & Finnegan, IJ	
☐ Change of correspond Address form PTO/SB/1	or agents OR, alternatively,							
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type	)			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee do of this form is NOT	ata will app a substitute	ear on the pat for filing an as	ent. If an assign	nee is identified below, the	document has been filed for	
(A) NAME OF ASSIGN	EE	(B)	RESIDENC	E: (CITY and	STATE OR CO	UNTRY)		
NOKIA COR		Espoo, FINLAND						
Please check the appropriate	e assignee category or catego	ries (will not be pri	nted on the p	atent);	individual 😾	corporation or other private g	roup entity U government	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):								
∑ Issue Fee								
☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to								
A variet older - # of	Copies3		Deposit Acc	ount Number_	audiorized by Ci	(enclose an extra	copy of this form).	
•	s (from status indicated above MALL ENTITY status. See 3	•	1h Amilies	nt is not claim	ing SMAIT FN	TITY status. See, e.g., 37 CF	R 1 27(a)(2)	
		<del></del>	<u>:</u>	:	<u> </u>			
NOTE: The Issue Fee and P		will not be accepted	from anyone			y paid issue fee to the applic istered attorney or agent; or t		
(Authorized Senature) (Date)			94		Johr	n E. Hoel, Reg.	No. 26,279	
Phis collection of information application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virginia 22313	s for reducing this burden, slainia 22313-1450. DO NOT	11. The information 122 and 37 CFR 1 O. Time will vary of hould be sent to the SEND FEES OR C	i is required .14. This collepending up Chief Infort OMPLETEI	to obtain or re- lection is estim- tion the individuation Officer, OFORMS TO	ain a benefit by on nated to take 12 lual case. Any co U.S. Patent and THIS ADDRESS	the public which is to file (an minutes to complete, includi omments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.